

Date Submitted by Member: \_\_\_\_\_

**MEMORANDUM**

From: Commanding Officer,  
To: NAVRESCEN RESPAY Coordinator (Fax: 916-387-7101)  
Subj: **ALTERNATE DRILL DATES FOR:**

NAME/RATE/RANK/SSN

1. The indicated special duty assignment is requested for the above named member:

☐ **Rescheduled Drill** (for the convenience of the Navy or AT)

Normally scheduled drills for (date/number of drills) are

\_\_\_\_\_ and are to be rescheduled for (date)

\_\_\_\_\_ and are to be performed at (location)

(must not cross into next fiscal year). Describe work and justify for CO's consideration:

☐ **Equivalent Training** (for any personal conflict)

Normally scheduled for (date/number of drills) are

\_\_\_\_\_ and are to be rescheduled for (date)

\_\_\_\_\_ and are to be performed at (location)

(must not cross into next fiscal year). PAY ☐ NONPAY ☐ Describe work and justify for  
CO's consideration: \_\_\_\_\_

☐ **Authorized Absence** (use for AT/ADT conflict or TNPQ)

Authorized for (dates) \_\_\_\_\_ Note that Authorized Absences do not waive  
your point requirement for a "successful" year.

☐ **Additional Drills** PAY ☐ NONPAY ☐ Will be performed on (date/number of AD's)

\_\_\_\_\_ at (location) \_\_\_\_\_

\_\_\_\_\_ for a total of \_\_\_\_\_ additional drill(s) per member authorized.

Describe work and justify for CO's consideration: \_\_\_\_\_

Division Officer	Approved	<input type="checkbox"/>	Disapproved	<input type="checkbox"/>	_____	Initials
Department Head	Approved	<input type="checkbox"/>	Disapproved	<input type="checkbox"/>	_____	Initials
Executive Officer	Approved	<input type="checkbox"/>	Disapproved	<input type="checkbox"/>	_____	Initials
<b>Commanding Officer</b>	<b>Approved</b>	<input type="checkbox"/>	<b>Disapproved</b>	<input type="checkbox"/>	_____	<b>Initials</b>